PEST AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS							F	RATE	FEE	[RATE	FEE	
FOR NUMBE				FILED	NUMBI	ER EXTRA	ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS 24				us 20=	• 9		7	K\$ 9=		OR	X\$18=	160 -	
INDEPENDENT CLAIMS 7 min					4			X40=		OR	X80=	320	
MULTIPLE DEPENDENT CLAIM PRESENT								-135=		OR	+270=		
* If the difference in column 1 is less than zero, ente						olumn 2		OTAL		OR	TOTAL	1199	
CLAIMS AS AMENDED - PA					RT II			4.33	and any lim to the A	J	OTHER		
		(Column 1)	(Column 2)			(Column 3)	3) SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE	11	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	,	K\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X40=		OR	X80=	3 4 4		
N.	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-	135=*		4	120	معادي	
e e									seemest side	OR	+270= TOTAL		
•	-	ADI	TOTAL DIT. FEE		OR	ADDIT. FEE							
<u> </u>		(Column 1)			mn 2) HEST	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT	·	NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE	, 7, 7	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	,	(\$ 9=		OR	.X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╵├╴	105			-270 -		
								135= TOTAL		OR	+270=		
	•									OR	ADDIT. FÉE		
		· <u>·</u>											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		K\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						J⊢			OR	<u> </u>		
	Make a second				« « « « » » « » « » « « » « « » « »	duma 2	L	-135=		OR	+270=	\$ £	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													